CONSULTANT PHARMACIST POST APPROVAL APPLICATION FORM

Section 1 – General information

1.1	**Title of proposed consultant pharmacist post:** Consultant Pharmacist Medicines Safety
1.2	**Date of application:** [redacted]
1.3	**Named contact for submission:** [redacted] **Telephone:** [redacted] **Email:** [redacted]
1.4	**Address of employing organisation:** [redacted]
1.5	**Proposed base for post holder:** [redacted]

Section 2 - Role and responsibilities of post

2.1	**Please attach the following for the post as an appendix:** ▪ **Job description** ▪ **Person specification,** ▪ **A job plan related to each of the sub sections in 3.1 below**

Section 3 - Needs assessment

3.1	**What are the issues, problems, service needs and gaps in current provision?** There is increasing scrutiny on medicines safety at both a national and international level and the impact of medication-related harm on patients has rightly become a top priority for improvement in the NHS. More consultant pharmacists specialising in this field are needed to enable dedicated senior pharmacist time on tackling long-standing and difficult issues that cut across professional, organisational and international boundaries. Consultant status brings recognition as an expert across all professions and levels within healthcare, providing the best opportunity to lead and influence strategy and decisions around medicines at the highest level within and across organisations.
3.2	**How were these identified?** The ambitions of the WHO medicines safety challenge, and the NHS England response to it, are significant. Achieving the aims will require collaboration, research and system leadership that consultant pharmacists dedicated to medicines safety will be able to provide.
3.3	**How will the post deliver medicines optimisation and value for money?**

	Ensuring that medicines are as safe as possible and are used in a safe way by patients and healthcare professionals is fundamental to medicines optimisation. By conducting research and education, sharing learning and best practice, and providing leadership and advice on policy, a consultant pharmacist for medicines safety will clearly contribute a great deal towards system-wide medicines optimisation for the benefit of many patients. When medication errors and adverse events occur they can lead to worsening of health and increased treatment needs in the form of medicines, procedures or care levels. Improvement of medicines safety at a system-wide level will therefore have a significant impact on healthcare productivity. The post we are seeking consultant recognition for is an existing band 8c post, so no financial investment will be required to create it.
3.4	**Indicate how the post is consistent with the spirit of DH guidance** This post will provide clinical excellence and professional leadership to drive improvement in medicines safety and medicines optimisation for the benefit of many patients. It will be in a strong position to influence and promote collaboration across hospital and primary care within Hampshire and beyond through the local and national Medication Safety Officer (MSO) networks. The high level of expertise and leadership will ensure that hard to achieve improvements can be made across models and pathways of care.

Section 4 - Anticipated outcomes

4.1	**Please state clearly what the post-holder will do, the level of responsibility they will hold and the outcomes expected in each of the following sections. Please include details in relation to patients, service improvement and medicines optimisation more generally.**
a)	**Expert practice:** The post-holder will be a recognised expert in medicines safety, informed by evidence, experience, personal research and learning from across the health sector. Within [redacted] they will have organisational level responsibility for medicines safety as the MSO and chair of the multi-disciplinary Medicines Safety Committee, which is established within the reporting structure of the organisation. They will prepare and submit medicines safety reports to the Trust Quality Committee and Trust Board on behalf of the Medical Director. The post-holder will provide training packages and safety alerts for doctors, nurses and pharmacists across the organisation, oversee the review of all reported medication errors and incidents in the Trust and formally investigate serious errors and incidents. As a member of the [redacted] Drugs Committee the post-holder will provide expertise to influence the choice of medicines and how they are used, ensuring that clinical guidelines and pathways promote medicines safety and minimise risk.
b)	**Research, evaluation and service development:** The post-holder will be a member of the [redacted] Pharmacy Research and Development Group which exists to promote and enable local pharmacy research and support

	pharmacists who wish to undertake research or develop their research capability. The group also reviews audit and service improvement proposals to ensure that they are of value and have robust methodology and dissemination plans. The post-holder will personally undertake research in the field of medicines safety, including collaborating with other organisations and seeking grants for work.
c)	**Education, mentoring and overview of practice:** The post-holder will act as supervisor and mentor to pharmacy professionals undertaking research, audit and improvement work within [redacted]. They will oversee and personally provide education on medicines safety, risk management, error theories and human factors to multi-professional groups. In the event of serious error the post-holder will support individual professionals involved in their reflective process and in the event of a formal complaint/claim.
d)	**Professional leadership and consultancy:** The post-holder will lead the [redacted] network of MSOs, which includes representatives from a variety of provider and commissioner organisations. Through this they will organise and chair meetings and encourage collaborative learning and improvement. They will also be an active and leading member of the national network of MSOs. The [redacted] MSO network is connected to the Area Prescribing Committees and the [redacted] Chief Pharmacists Network. The post-holder will regularly attend the Chief Pharmacists meetings to ensure that the work of MSOs is aligned to strategic priorities and to engage chief pharmacist and CCG head of medicines management support for significant changes or cross-cutting work programs. The post-holder will be a member of the Senior Pharmacy Management team within [redacted] and as such will have a strategic and influential role within the organisation at the highest management level.

Section 5 – Distinction between consultant and advanced level practice

5.1	**How will this post differ from that fulfilled by other members of the pharmacy team?** All pharmacists have a role in ensuring medicines safety for individual patients they see in the course of their everyday work and advanced practitioners would be expected to promote medicines safety beyond the individual patient, to groups of patients within their specialist field. They do this by writing guidelines and procedures for pharmacy and other professionals to follow within their area of expertise. A consultant pharmacist for medicines safety will impact on a much larger scale, at organisational and system level, and across all areas of clinical practice. They will bring together learning from a wide field, crossing clinical specialities, organisations and nations and seek to embed this learning across [redacted] through leading the network of MSOs.

Section 6 – Strategic benefits

6.1	**How will the post contribute to the organisation's clinical governance agenda and**

	strategic plans? Medicines safety is high on the organisation's clinical governance agenda and considered to be a major factor in patient safety. The post will chair the Medicines Safety Group – a multidisciplinary forum which feeds into the corporate Patient Safety Committee – and will provide executive level reports on medicines safety within the organisation. As MSO and a Senior Pharmacy Manager the post will input into the organisation's medicines management annual reports and strategic plans
6.2	**How will the post contribute to health service policy and targets?** The WHO medicines safety challenge has driven a response from NHS England to identify key priorities and set targets for medicines improvement in the NHS. It is expected that some national metrics will be produced to monitor improvement. This post will drive improvement against these targets at a local area level and also contribute to defining and refining the targets at national level.

Section 7 – Organisational map

Please provide an organisational map that outlines the key working relationships the post-holder will have within the organisation (professional manager, advanced level pharmacists, other healthcare professional), wider health community/external partners (including Higher Education and, if appropriate, commercial sponsor) and links to strategic service planning.

N.B. It is expected that post-holders will normally be professionally and organisationally responsible to the chief pharmacist for the employing authority (see also 9.2 below). Where a post-holder has accountabilities to a directorate/speciality outside pharmacy, clarity will need to be provided on specific reporting arrangements to both the directorate/speciality and the chief pharmacist. In this situation, it is expected that the post-holder will be accountable to the chief pharmacist both professionally and for medicines management policies.

See attached organisational map

Section 8 - Risk assessment of professional and legal liabilities:

This post-holder will be working at a high degree of personal and professional autonomy. They will need to be able to make decisions where precedents do not exist. A thorough risk assessment of the post must be undertaken. This section should include the structures and processes that will be in place to minimise risk to patients, post-holder and the employing organisation:

The post will operate within the [redacted] Pharmacy management structure, being directly accountable to the Chief Pharmacist and being fully integrated into the Senior Management Team.

[redacted] Pharmacy includes a large number of expert practitioner pharmacists in various specialist fields who all work in a supportive and collaborative way to share knowledge and advise others where necessary. [redacted] clinical pharmacists are well networked to their peers and other experts across the NHS. The post-holder will have access to this pool of knowledge in addition

to the knowledge of leading specialist medical consultants within the organisation. Medicines safety in [redacted] is managed through robust governance processes with an established meeting and reporting structure in place and full support and engagement from the Director of Nursing and Medical Director. Multidisciplinary input and governance structures ensure that the decisions of the post-holder are made with the full support of the organisation. The national network of MSOs provides a peer group to consult with, including others at the same very senior level.

Section 9 - Performance review

9.1	**How will the post be monitored to ensure that it meets the identified needs and stated outcomes?** Line management from the [redacted] Chief Pharmacist will include formal objective setting and performance and development review. It will also provide regular one to one support and feedback. Regular reporting to Trust Committees will ensure that there is accountability for delivering on action plans and targeted improvements. Reporting against local and national metrics will allow monitoring of organisational performance for medicines safety and the impact of the post. Regular attendance at regional chief pharmacist meetings will ensure that strategic direction is maintained.
9.2	**What arrangements will be made for clinical supervision, development review and continuing professional development of the post holder?** Annual appraisal discussions will include a review of development progress and needs. The Trust has an established leadership development program that includes access to 360 degree appraisal and coaching/mentoring. Senior pharmacy leaders are encouraged to network with their peers and attend relevant conferences to stay up to date and share innovation. Access to appropriate external courses or training will be supported as needed. [redacted] has a number of existing consultant pharmacist posts that are available for peer review and/or supervision as needed and the post-holder will be encouraged to make links with the national network of consultant pharmacists. Expert supervision will be sought from external medicines safety experts as required.

Job description

Post Title:	**Consultant Pharmacist Medication Safety** **Deputy Chief Pharmacist Quality, Risk and Research**
Directorate/Department:	Pharmacy Clinical Support Services
Agenda for Change band:	8c
Accountable to:	Chief Pharmacist
Accountable for:	Principal Pharmacist Education and Training (and training team) Principal Pharmacist Quality Assurance (and Quality control team) Medication Safety Team
Main Purpose:	Striving to ensure world-class medicines management processes through leadership, planning, developing, monitoring and patient focused practices. To undertake the role of Medication Safety Officer on behalf of the Trust and lead and influence medication safety across Hampshire and beyond.
Key Working Relationships:	• Managing and leading a team of approximately 30 staff, consisting mostly of highly specialist pharmacists and pharmacy technicians. • Working in co-operation with the Chief Pharmacist and other Deputy Chief Pharmacists and senior staff within pharmacy to ensure delivery of medicines safety objectives in line with pharmacy and organisational strategy. • Liaising with clinical and operational directors and managers within the Trust regarding strategic planning and development of safe medicines management processes. • Linking with the national MSO network. • Providing medicines safety leadership to appropriate Trust committees, e.g. Drugs Committee, Medicines Safety Group, Quality Governance Steering Group. • Networking with pharmacy quality and safety leads in other NHS organisations to ensure the spread of good practice and practice research and enabling benchmarking e.g. active participation in the regional specialist pharmacy services collaborative audits and projects. • Maintaining communication with patient representative groups to ensure that strategy and medicines processes are in line with patient needs and expectations. • Liaising with healthcare education leads within and outside the Trust to ensure optimal development of pharmacy staff. • Working closely with Trust and university research leads to ensure medicines safety research is in line with Trust strategy and of the highest quality.
General Duties:	1. Managing and strategically developing the pharmacy risk and quality management services and pharmacy education and training in accordance with Divisional, Trust and local health community business plans and government priorities. This includes responsibility for managing the budgets for the services and staff aspects including recruitment, appraisal, sickness absence monitoring, disciplinary issues, statutory and mandatory training and maintenance of relevant electronic HR systems.

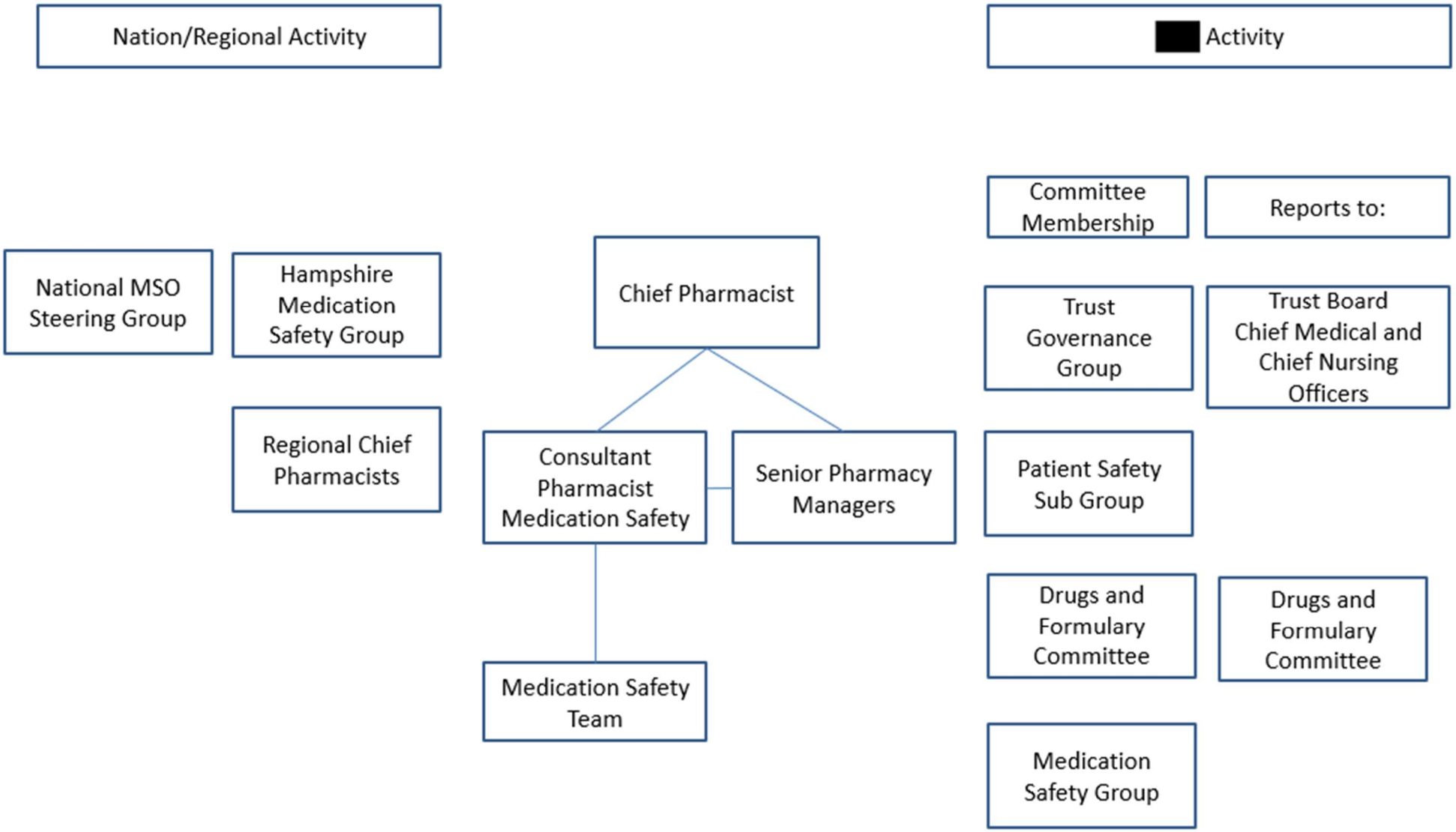
2. Contributing to the development of medicines management strategy and objectives and developing and implementing plans in accordance with these. Monitoring the workload and performance of services and developing and implementing capacity and workforce plans to ensure service resilience
3. Developing and maintaining business continuity and succession planning strategies to ensure robust delivery of medicines safety and quality programmes and services now and into the future.
4. Developing, delivering and directing high quality medicines safety and risk/quality management research activity, including obtaining research grants and ensuring publication of work. Actively encouraging and supporting pharmacy staff to engage in research and audit and publish material.
5. Providing professional and strategic leadership to the pharmacy quality, risk and research teams, acting as a role model, with regard to the quality and standards of service provided.
6. Responsible for ensuring the quality of pharmacy processes and staff development to minimise risk and promote the safest medicines practice.
7. Acting as the Medication Safety Officer (MSO) for the Trust. Ensuring that all medicine related complaints, errors and incidents are recorded, investigated and reported, and that appropriate actions are taken promptly to prevent recurrence. Taking a lead role in the national network of MSOs.
8. Chairing the [redacted] Medication Safety Group to provide leadership and ensure that national and local priorities are addressed. Reporting regularly to the [redacted] Chief Pharmacists Network and supporting other medication safety roles across the area as required.
9. Having delegated responsibility for pharmacy aspects of medical gas management in the organisation, ensuring safe clinical use and processes in collaboration with Estates specialists. To chair the [redacted] Medical Gases Committee.
10. Contributing, as the medicines safety and pharmacy expert and representative, to the Clinical Support Services Care Group risk and governance management processes and meetings.
11. Developing, maintaining, implementing and monitoring medicines management policies and procedures to ensure that risks associated with medicines within the Trust are eliminated or minimised, and that practice is in accordance with medicines law, regulations and, national safety alerts and accepted best practice.
12. Preparing and delivering regular reports on medicines management quality and risk across the Trust to divisional governance leads, Trust directors and commissioners.
13. Directing medicines management, risk reduction and research projects within the Trust and presenting outcomes to local and national forums.
14. Co-ordinating the communication and sharing of information between different parts of the pharmacy service and between pharmacy and clinical areas, to ensure a consistent quality of pharmacy services and development and application of Trust-wide medicines management policies.
15. Promoting and supporting the continued development of extended roles for pharmacy staff to improve patient care and optimise staff development.
16. Providing an advanced level specialist clinical pharmacy service to patients in order to maintain an active clinical practice base. This

includes providing, developing and evaluating pharmaceutical care for individual patients.

17. Playing a lead role, at both regional and national levels, in developing medicines risk management and research to improve patient care and ensure [redacted] is at the forefront of such developments.
18. Maintaining and strengthening formal links with higher education institutes to ensure collaboration for high quality pharmacy research and education and training of pharmacy staff.
19. Acting as tutor for staff undertaking post-graduate research qualifications and as mentor for senior staff within pharmacy.
20. Deputising for the Chief Pharmacist as required.
21. The department is moving towards 7 day working. All staff are required to contribute to extended hours, weekends & bank holidays as part of core hours. This includes general dispensary duties such as dispensing prescriptions and clinical pharmacy duties. Weekend working will be no more frequent than 1 weekend in 4 unless specifically agreed on appointment.

Organisation map

Example application 1



EMPLOYMENT CRITERIA/PERSON SPECIFICATION

The purpose of this specification is to identify the attributes required by applicants to perform the duties described in the job description. These are identified as either essential, ie those without which the job could not be performed adequately, or desirable, ie those which, although not essential, could enhance job performance. These criteria should be capable of being measured in some way through the selection process either by information given on the application form and references or by aptitude test results or questions planned for the interview. The specification should be used to shortlist applicants and to compare how well candidates match the agreed specification.

People with disabilities may apply for this post. Please specify here if there are any physical or mental impairments/disabilities which may prevent performance of this post to an acceptable level.

Post Title: **Consultant Pharmacist Medication Safety**
Deputy Chief Pharmacist Quality, Risk & Research

Directorate/Department: **Pharmacy**

NB: You would be required to map the person specification against the Advanced Pharmacist Framework in the RPS approval process

Headings	Essential	Desirable	Means of Assessment
Physical requirements of the post	• Able to visit wards and departments including offsite units.		Application and interview
Qualifications training required	• Master's degree in pharmacy or equivalent. • General Pharmaceutical Council registration as a practising pharmacist • Postgraduate qualification in clinical pharmacy or equivalent experiential practice. • Research based higher degree or training in research methodologies • Training in incident investigation, risk assessment and root cause analysis techniques	• Royal Pharmaceutical Society membership and faculty fellowship • Management training /qualification	Application and interview Online GPhC register check
Previous or relevant experience necessary	• Considerable post-registration experience at an advanced level of pharmacy practice in a large hospital. • Experience of managing a team and service. • Experience of leading on the implementation of national medicines safety strategies • Experience of training and tutoring • Evidence of published research	• Experience within pharmacy quality assurance services • Experience within pharmacy education and training management and leadership	Application and interview

Consultant Pharmacist Medication Safety Job Plan 2019/20

Monday	Tuesday	Wednesday	Thursday	Friday
		Team Management/admin 1h	Team Management/admin 1h	
Expert Practice Clinical pharmacy G4N (paediatrics) 2hr	Expert Practice Trust Level - Governance/Drug and therapeutics etc 2hr	Education (medication safety) Local Induction/PRP Training 1hr	Expert Practice Medication Safety Team meeting – operational/strategic 2hr	Expert Practice Clinical pharmacy G4N (paediatrics) 2hr
	Research (general) Pharmacy R&D Board 0.5hr	Research (medication safety) [redacted] Meeting 0.5hr	Leadership. Chair – Trust Medication safety Group Meeting 1hr	Expert Practice Review incident numbers/severity and actions for specific incidents 2.5hr
Leadership Chair of [redacted] Medication Safety group 0.5hr	Research (general) Support/Supervision 1.5hr	Education (medication safety) National HEE Prescribing Advisory Board – member, meeting preparation. 0.5hr	Research (medication safety) Data analysis current research projects 1hr	Expert Practice National Medicines for Children Project Chair (RCPCH) – strategy meeting and support 1hr
Expert Practice Review of local Medication Incidents/action 3hr	Research (medication safety) [redacted] Grant work 1hr	Expert practice Medication safety advice to pharmacy team – ad hoc and within meetings 1.5hr	Research (medication safety) Support local researchers and audit projects 2hr	Stat and Mand/CPD 1hr
Expert practice Medical gas safety 0.5hr	Research (medication safety) Dissemination/Paper preparation 0.5hr	Expert Practice Scoping meetings for incidents. Review & recommend action for specific incidents 1.5hr	Research (medication safety) Grant applications 1hr	Education (medication safety) – Developing relationship with local HEI – 0.5hr
Research (medication safety) Publication Review 0.5hr	Expert Practice Review of patient safety alerts and actions 2hr			

Expert Practice 20hrs
Research (medication safety) 6.5hrs
Education (medication safety) 2hrs
Leadership 1.5hrs